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Date: May 10, 2002

Please Deliver To: Examiner Larry Helms
U.S. Patent and Trademark Office-Art Unit 1642

Facsimile No.: (703) 746-5219

Phone: (703) 306-5879

From: James S. Keddie, Ph.D., Reg. No. 48,920

Re: US Patent Application No. 09/425,075 for
FUNCTIONALLY ASSEMBLED ANTIGEN-SPECIFIC INTACT RECOMBINANT
ANTIBODY AND A METHOD FOR PRODUCTION THEREOF
By: Choudary et al.
Atty. Docket: UCAL-269

Message: Please see attached filing following this cover sheet including:

- RCE Transmittal (1 page)
- Fee Transmittal in duplicate (2 pages)
- Amendment (10 pages)
- Request for Extension of Time (1 page)
- Copy of Revocation of Power of Attorney/Power of Attorney (2 pages)

Total number of pages, including this cover sheet: 16

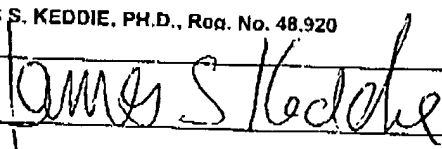
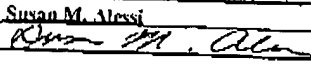
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PTO/SB/21 (08-00)

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TRANSMITTAL FORM		Application Number	
(to be used for all correspondence after initial filing)		09/425,075	
Total Number of Pages in This Submission		Filing Date	
2		October 21, 1999	
ENCLOSURES (check all that apply)		First Named Inventor	
<input type="checkbox"/> Fee Transmittal Form		CHOUDARY, PRABHAKARA V.	
<input type="checkbox"/> Fee Attached		Group Art Unit	
<input type="checkbox"/> Amendment / Reply		1642	
<input type="checkbox"/> After Final		Examiner Name	
<input type="checkbox"/> Affidavits/declaration(s)		L. HELMS	
<input type="checkbox"/> Extension of Time Request		Attorney Docket Number	
<input type="checkbox"/> Express Abandonment Request		UCAL-269	
<input type="checkbox"/> Information Disclosure Statement			
<input type="checkbox"/> Certified Copy of Priority Documents			
<input type="checkbox"/> Response to Missing Parts/Incomplete Application			
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
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<input type="checkbox"/> Licensing-related Papers			
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<input type="checkbox"/> Petition to Convert to a Provisional Application			
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<input type="checkbox"/> Terminal Disclaimer			
<input type="checkbox"/> Request for Refund			
<input type="checkbox"/> CD, Number of CD(s) _____			
Remarks			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual Name	JAMES S. KEDDIE, PH.D., Reg. No. 48,920		
Signature			
Date	April 16, 2002		
CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: April 16, 2002.			
Typed or printed name	Susan M. Alessi		
Signature			
Date	April 16, 2002		

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**FEE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT		(\$ 1350.00)																																																																																																																													
METHOD OF PAYMENT																																																																																																																															
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit overpayments to: Deposit Account Number 50-0815 Deposit Account Name Bozicevic, Field & Francis LLP <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27 2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																																																																																																																															
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*Reduced by Basic Filing Fee Paid

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	James S. Kiddle, Ph.D.	Registration No. (Attorney/Agent)	48,920
Signature	<i>James S. Kiddle</i>	Telephone	(550) 327-3400
		Date	05/10/2002

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